Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 1 of 57

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	't 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Brin- iden	e the name that is on a government-issued ure identification (for mple, your driver's use or passport). g your picture tification to your enting with the trustee.	Dominic First name M. Middle name Pope Last name and Suffix (Sr., Jr., II, III)	Kristina First name M. Middle name Pope Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-5025	xxx-xx-4194

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 2 of 57

Debtor 1
Debtor 2
Debtor 2
Dominic M. Pope
Kristina M. Pope

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s)	■ I have not used any business name or EINs. Business name(s)		
		EINS	EINs		
5.	Where you live	16 Fillmore Lane	If Debtor 2 lives at a different address:		
		Streamwood, IL 60107 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Cook County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 3 of 57

_	otor 1 otor 2	Dominic M. Pope Kristina M. Pope			Doddinen		Case number (if known)	
Par	t 2:	Tell the Court About \	∕our Bankruı	otcv Ca	se			
7.	The	chapter of the cruptcy Code you are	Check one.	(For a b	rief description of eac	h, see <i>Notice Required by</i> 1 and check the appropria	11 U.S.C. § 342(b) for Individuals Filing for te box.	Bankruptcy
	choc	sing to file under	■ Chapter	7				
			☐ Chapter					
			☐ Chapter					
			☐ Chapter					
8.	How	you will pay the fee	about order.	how yo	u may pay. Typically,	if you are paying the fee y	ck with the clerk's office in your local court fo ourself, you may pay with cash, cashier's ch aalf, your attorney may pay with a credit card	neck, or money
					the fee in installmente in Installments (Office		on, sign and attach the Application for Indiv	iduals to Pay
			☐ I required but is applie	est that not request to you	t my fee be waived (uired to, waive your fe ur family size and you	You may request this option e, and may do so only if you are unable to pay the fee	on only if you are filing for Chapter 7. By law our income is less than 150% of the official in installments). If you choose this option, you cial Form 103B) and file it with your petition	poverty line that ou must fill out
9.	Have	you filed for	■ No.					
	bankruptcy within the last 8 years?	☐ Yes.						
			[District	-	When	Case number	
			[District		When	Case number	
			[District		When	Case number	
10.		any bankruptcy s pending or being	■ No					
	filed not f you,	by a spouse who is iling this case with or by a business ner, or by an	☐ Yes.					
			[Debtor			Relationship to you	
			[District		When	Case number, if known	
			[Debtor			Relationship to you	
			[District		When	Case number, if known	
11.		ou rent your lence?	□ No.	Go to li	ne 12.			
	resid	iende f	Yes.	Has yo	ur landlord obtained a	n eviction judgment again	st you and do you want to stay in your resid	ence?
				•	No. Go to line 12.			
					Yes. Fill out <i>Initial Sta</i> bankruptcy petition.	atement About an Eviction	Judgment Against You (Form 101A) and file	e it with this

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 4 of 57

Deb	tor 2 Kristina M. Pope				Case number (if known)	
Part	Report About Any Bu	ısinesses `	You Own	as a Sole Proprie	tor	
12.	Are you a sole proprietor					
	of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of bus	siness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any		
If you have more than one Street, City, State & ZIP Code sole proprietorship, use a separate sheet and attach						
	it to this petition.		Check	the appropriate bo	ox to describe your business:	
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
			Stockbroker (as defined in 11 U.S.C. § 101(53A))			
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))	
				None of the above	e	
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can s deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow in 11 U.S.C. 1116(1)(B).				a small business debtor, you must attach your most recent balance sheet, statement of		
	For a definition of small	■ No.	I am n	ot filing under Char	oter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.			
		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Part	t 4: Report if You Own or	· Have Any	Hazardo	us Property or An	y Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is t	he hazard?		
	public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?		
	- 				Number, Street, City, State & Zip Code	

Debtor 1

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 5 of 57

Debtor 1 Dominic M. Pope Debtor 2 Kristina M. Pope

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 6 of 57

Debtor 2 Kristina M. Pope				Case number (if known)				
Par	t 6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consindividual primarily for a person			defined in 11 U.S.C. § 101(8)	as "incurred by an	
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe	that are not consu	mer debts or busi	ness debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	are paid that funds will be availa	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
	administrative expenses are paid that funds will		No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	■ 1-49		1 ,000-5,000)	 25,001-50,000		
	you estimate that you owe?	☐ 50-99		5001-10,00	0	5 0,001-100,000		
		□ 100-1 □ 200-9		□ 10,001-25,0	000	☐ More than100,00	00	
19.	How much do you	\$ 0 - \$	50.000	□ \$1,000,001	- \$10 million	□ \$500,000,001 - \$	1 billion	
	estimate your assets to be worth?		01 - \$100,000	\$10,000,00		\$1,000,000,001		
			001 - \$500,000		1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 ☐ More than \$50 bi		
		山 \$500,	001 - \$1 million	Δ ψ100,000,0	στ φοσο πιιιισπ	— Wore than 600 bi		
20.	How much do you estimate your liabilities	□ \$0 - \$	50,000	□ \$1,000,001		□ \$500,000,001 - \$	1 billion	
	to be?		001 - \$100,000		1 - \$50 million	\$1,000,000,001 \$10,000,000,00		
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million			☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million		ı - \$50 billion villion	
		ப \$500,	001 - \$1 IIIIII0II					
Par	7: Sign Below							
For	you	I have ex	camined this petition, and I declar	e under penalty of	perjury that the in	formation provided is true and	d correct.	
			chosen to file under Chapter 7, I attates Code. I understand the relie					
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					ll out this			
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.							
		bankrupt and 357						
			inic M. Pope		/s/ Kristina M			
			c M. Pope e of Debtor 1		Kristina M. Po Signature of De			
		Executed	d on July 8, 2017		Executed on .	July 8, 2017		
			MM / DD / YYYY			MM / DD / YYYY		

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 7 of 57

Debtor 1	Dominic M. Pope	Document	Page 7 of 57	
Debtor 2	Kristina M. Pope		Cas	se number (if known)
•	attorney, if you are ed by one	under Chapter 7, 11, 12, or 13 of title 11, Un	ited States Code, and have	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
•	not represented by ey, you do not need page.			vledge after an inquiry that the information in the
		/s/ James Engel	Date	July 8, 2017
		Signature of Attorney for Debtor		MM / DD / YYYY
		James Engel		
		Printed name		
		James Engel		
		Firm name		
		2071 Irving Park		
		Hanover Park, IL 60133		
		Number, Street, City, State & ZIP Code		
		Contact phone 630 837-8045	Email address	jengel2001@sbcglobal.net

03127077Bar number & State

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main

		Documer	nt Page 8 of 57				
Fill in this information to identify your case:							
Debtor 1	Dominic M. Pope						
	First Name	Middle Name	Last Name	-			
Debtor 2	Kristina M. Pope						
(Spouse if, filing)	First Name	Middle Name	Last Name	_			
United States Bankruptcy Court for the:		NORTHERN DISTRICT O	F ILLINOIS	_			
Case number							

Official Form 106Sum

(if known)

Summary of Your Assets and Liabilities and Certain Statistical Information

☐ Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your as Value o	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	5,690.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	5,690.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	94,329.40
	Your total liabilities	\$	94,329.40
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,052.74
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,049.25
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your	r other sch	nedules.
7.	■ Yes What kind of debt do you have?		

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main

		Document	Page 9 of 57	
	Dominic M. Pope		o	
Debtor 2	Kristina M. Pope		Case number (if known)	

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,662.98

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	40,724.23
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	40,724.23

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 10 of 57 Fill in this information to identify your case and this filing: Debtor 1 Dominic M. Pope Middle Name Last Name First Name Debtor 2 Kristina M. Pope First Name (Spouse, if filing) Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number П Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put Lexus Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Debtor 1 only Model Creditors Who Have Claims Secured by Property. 2001 Year: Debtor 2 only Current value of the Current value of the 95,000 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another \$1,000.00 \$1,000.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Huyndai Who has an interest in the property? Check one Make: the amount of any secured claims on Schedule D: Sonata Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2005 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: 155.000 entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another \$1,500.00 \$1,500.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

■ No

☐ Yes

	Case 17-20	0435 Doc 1	Filed 07/08/17 Document	Entered 07/08/17 09:43:09 Page 11 of 57	Desc Main
Debtor 1 Debtor 2	Dominic M. Po Kristina M. Po			Case number (if know	n)
				om Part 2, including any entries for=>	\$2,500.00
Part 3: De	scribe Your Persona	al and Household Item	s		
Do you ov	vn or have any leç	gal or equitable inter	est in any of the follow	ing items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>Exampl</i> □ No	old goods and fui les: Major appliance Describe	r nishings es, furniture, linens, cl	nina, kitchenware		
		Furnishings			\$500.00
□ No	les: Televisions and including cell p	hones, cameras, med		oment; computers, printers, scanners; musi	c collections; electronic devices
		T\/ lanton			\$450.00
	<u></u>	TV, Lap top			\$450.00
Example ■ No □ Yes.	bles of value les: Antiques and fi other collection	gurines; paintings, pri s, memorabilia, colled		oks, pictures, or other art objects; stamp, co	
■ No □ Yes. 9. Equipm Exampl	bles of value les: Antiques and fi other collection Describe ent for sports and les: Sports, photogr musical instrun	gurines; paintings, prins, memorabilia, collections, memorabilia, collections and the collections are supplied to the collecti	ctibles	bks, pictures, or other art objects; stamp, co	pin, or baseball card collections;
■ No □ Yes. 9. Equipm Exampl	bles of value les: Antiques and fi other collection Describe ent for sports and les: Sports, photogi	gurines; paintings, prins, memorabilia, collections, memorabilia, collections and the collections are supplied to the collecti	ctibles		pin, or baseball card collections;
■ No □ Yes. 9. Equipm Exampl	bles of value les: Antiques and finction other collection Describe ent for sports and les: Sports, photogramusical instrum Describe	gurines; paintings, prins, memorabilia, collections, memorabilia, collections and the collections are supplied to the collecti	ctibles		pin, or baseball card collections;

Official Form 106A/B Schedule A/B: Property page 2

12. **Jewelry** *Examples*: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

■ Yes. Describe.....

Clothing

Jewelry

\$1,200.00

\$600.00

Debtor 1	Case 17-20435 Dominic M. Pope	Doc 1	Filed 07/08/17 Document	Entered 07/08/17 09:43:09 Page 12 of 57	Desc Main
Debtor 2	Kristina M. Pope			Case number (if known)	
Exar ■ No	farm animals nples: Dogs, cats, birds, hors s. Describe	es			
		old itams voi	ı did not already list i	ncluding any health aids you did not list	
■ No	s. Give specific information	-	a did not aneddy not, n	lordung any nearth ards you did not not	
	I the dollar value of all of yo Part 3. Write that number h			ny entries for pages you have attached	\$2,950.00
	escribe Your Financial Assets own or have any legal or eq		est in any of the follow	ing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No				osit box, and on hand when you file your petiti	ion
				Cash	\$50.00
□ No ■ Yes	institutions. If you have	e munipie acc	Institution n		
_	,	е типріе асс		ame:	\$150.00
_	S	е типре асс	Institution n	ame:	\$150.00
Yes	17.1.	y traded stoc	Bank of A TCF Bank	ame: America	
■ Yes	17.1. 17.2. Is, mutual funds, or publicly apples: Bond funds, investment	y traded stoc	Institution of A Bank of A TCF Bank ks th brokerage firms, more	ame: America	
■ Yes 18. Bond Exar No □ Yes 19. Non-joint	17.1. 17.2. Is, mutual funds, or publicly apples: Bond funds, investments.	y traded stoc nt accounts wi	Institution of A Bank of A TCF Bank ks th brokerage firms, more sauer name:	ame: America	\$40.00
■ Yes 8. Bond Exar No □ Yes 19. Non-joint ■ No	17.1. 17.2. Is, mutual funds, or publicly inples: Bond funds, investment in publicly traded stock and inventure S. Give specific information a	y traded stoc nt accounts wi nstitution or is	Institution of A Bank of A TCF Bank tks th brokerage firms, more suer name: corporated and unince	America Contey market accounts	\$40.00
■ Yes 18. Bond Exar No □ Yes 19. Non- joint ■ No □ Yes 20. Gove Nega Non- ■ No	In the second stock and secon	y traded stocent accounts with accounts with accounts with accounts with accounts with account them	Institution of A Bank of A TCF Bank tks th brokerage firms, more assuer name: corporated and unince negotiable and non-ness, cashiers' checks, proi	name: America New market accounts Orporated businesses, including an interes % of ownership:	\$40.00
■ Yes 18. Bond Exar No □ Yes 19. Non- joint ■ No □ Yes 20. Gove Nega Non- ■ No	In the specific information at	y traded stocent accounts with accounts with accounts with accounts with accounts with account them	Institution of A Bank of A TCF Bank tks th brokerage firms, more assuer name: corporated and unince negotiable and non-ness, cashiers' checks, proi	merica Merica Mey market accounts Proporated businesses, including an interes % of ownership: Regotiable instruments missory notes, and money orders.	\$40.00
■ Yes 18. Bond Exar No □ Yes 19. Non- joint ■ No □ Yes 20. Gove Nega Non- ■ No □ Yes	In the second of	y traded stocent accounts with accounts with accounts with accounts with account them	Institution of A TCF Bank tks th brokerage firms, more suer name: corporated and unince negotiable and non-ness, cashiers' checks, proiot transfer to someone	merica Merica Mey market accounts Proporated businesses, including an interes % of ownership: Regotiable instruments missory notes, and money orders.	\$40.00

Schedule A/B: Property

Official Form 106A/B

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 13 of 57 Debtor 1 Dominic M. Pope Kristina M. Pope Debtor 2 Case number (if known) 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No $\hfill \square$ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information... 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

■ No

☐ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

■ No

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 14 of 57 Debtor 1 Dominic M. Pope Kristina M. Pope Debtor 2 Case number (if known) ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$240.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$2,500.00 57. Part 3: Total personal and household items, line 15 \$2,950.00 58. Part 4: Total financial assets, line 36 \$240.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00

63. Total of all property on Schedule A/B. Add line 55 + line 62 \$5,690.00

\$5,690.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

62. Total personal property. Add lines 56 through 61...

\$5,690.00

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main

		DUCUITIE	IIL FAUE 13 UI 31	
Fill in this infor	mation to identify your	case:		
Debtor 1	Dominic M. Pope			
	First Name	Middle Name	Last Name	
Debtor 2	Kristina M. Pope			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2001 Lexus 95,000 miles Line from Schedule A/B: 3.1	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
Ellie IIolii Genedale Av.B. G.1			100% of fair market value, up to any applicable statutory limit	
2005 Huyndai Sonata 155,000 miles	\$1,500.00		\$1,500.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B. 3.2			100% of fair market value, up to any applicable statutory limit	
Furnishings Line from Schedule A/B: 6.1	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Line nom <i>Schedule AVD</i> . V.1			100% of fair market value, up to any applicable statutory limit	
TV, Lap top Line from Schedule A/B: 7.1	\$450.00		\$450.00	735 ILCS 5/12-1001(b)
Line IIom Schedule AVD. 1.1			100% of fair market value, up to any applicable statutory limit	
Bicycles Line from Schedule A/B: 9.1	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
LINE HOIN SCHEUUIE PAD. 3.1			100% of fair market value, up to any applicable statutory limit	

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 16 of 57

Kristina M. Pope Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Clothing 735 ILCS 5/12-1001(a) \$600.00 \$600.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit **Jewelry** 735 ILCS 5/12-1001(b) \$1,200.00 \$1,200.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit Cash 735 ILCS 5/12-1001(b) \$50.00 \$50.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit **Bank of America** 735 ILCS 5/12-1001(b) \$150.00 \$150.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **TCF Bank** 735 ILCS 5/12-1001(b) \$40.00 \$40.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? Yes

Debtor 1

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main

		20001110	7.10 1 6.00 2 1 6 1 6 1	
Fill in this infor	mation to identify your	case:		
Debtor 1	Dominic M. Pope			
	First Name	Middle Name	Last Name	
Debtor 2	Kristina M. Pope			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main

Page 18 of 57 Document Fill in this information to identify your case: Debtor 1 Dominic M. Pope Middle Name Last Name First Name Debtor 2 Kristina M. Pope (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known) Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of **Total claim** 4.1 **Adventist Hinsdale Hospital** Last 4 digits of account number 3904 \$139.13 Nonpriority Creditor's Name 75 Remittance Dr. When was the debt incurred? **Suite 3250** Chicago, IL 60675 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify

Medical

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 19 of 57

Debtor	2 Kristina M. Pope	Case number (if know)	
4.2	Alexian Brothers MC Nonpriority Creditor's Name	Last 4 digits of account number A380	\$33.66
	PO Box 14000 Belfast, ME 04915	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
4.3	Alexian Brothers MC	Last 4 digits of account number A380	\$186.33
	Nonpriority Creditor's Name PO Box 14000	When was the debt incurred?	
	Belfast, ME 04915 Number Street City State Zlp Code	As of the date you file the plain in Cheek all that each	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
	_	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	□ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Medical	
4.4	Alexian Brothers MC Nonpriority Creditor's Name	Last 4 digits of account number	\$58.00
	22589 Network PI	When was the debt incurred?	
	Chicago, IL 60673 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Medical	

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 20 of 57

	2 Kristina M. Pope	Case number (if know)	
4.5	Alliant Credit Union	Last 4 digits of account number 7921	\$1,400.00
	Nonpriority Creditor's Name 11545 W. Tohy	When was the debt incurred?	
	Chicago, IL 60666 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	
4.6	Barclay's Bank Delaware	Last 4 digits of account number 7558	\$1,500.00
	Nonpriority Creditor's Name 125 S. West St. Wilmington, DE 19801	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card	
4.7	Capital One Nonpriority Creditor's Name	Last 4 digits of account number 7530	\$2,800.00
	PO Box 30281 Salt Lake City, UT 84130	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Credit Card	

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 21 of 57

Debtor 1 Dominic M. Pope

Debte	or 2 Kristina M. Pope	Case number (if know)	
4.8	Capital One	Last 4 digits of account number 2576	\$2,700.00
	Nonpriority Creditor's Name c/o Blitt & Gaines 661 Glenn Wheeling, IL 60090	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	
4.9	Capital One	Last 4 digits of account number 1967	\$2,500.00
	Nonpriority Creditor's Name	When we she debt in survey 2	
	c/o Blitt & Gaines 661 Glenn	When was the debt incurred?	
	Wheeling, IL 60090 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	7.5 or and date you may also statum to onlook an alac apply	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	
4.1	Capital One Bank	Last 4 digits of account number 7965	\$477.00
<u> </u>	Nonpriority Creditor's Name		
	PO Box 30285	When was the debt incurred?	
	Salt Lake City, UT 84130 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other Specify Credit Card	
	□ 100	Other. Specify	

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 22 of 57

	Dominic M. Pope Kristina M. Pope		Case number (if know)	
	Capital One Bank	Last 4 digits of account number	5992	\$4,407.00
ı	Nonpriority Creditor's Name PO Box 30285 Salt Lake City, UT 84130	When was the debt incurred?		
1	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
ı	Debtor 1 only	☐ Contingent		
I	Debtor 2 only	☐ Unliquidated		
I	Debtor 1 and Debtor 2 only	☐ Disputed		
I	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
I	☐ Check if this claim is for a community	☐ Student loans		
	lebt s the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
I	No	Debts to pension or profit-sharing	g plans, and other similar debts	
ĺ	☐ Yes	■ Other. Specify Credit Card	l	
-	Capital One/HSBC Bank	Last 4 digits of account number	7827	\$448.00
ı	Nonpriority Creditor's Name PO Box 30285 Salt Lake City, UT 84130	When was the debt incurred?		
1	Number Street City State Zlp Code Nho incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
ı	Debtor 1 only	☐ Contingent		
I	Debtor 2 only	☐ Unliquidated		
I	Debtor 1 and Debtor 2 only	☐ Disputed		
I	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
I	☐ Check if this claim is for a community	☐ Student loans		
	lebt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
ı	No	Debts to pension or profit-sharing	g plans, and other similar debts	
ſ	☐ Yes	Other. Specify Credit Card	<u> </u>	
	Capital One/HSBC Bank	Last 4 digits of account number	3013	\$651.00
	Nonpriority Creditor's Name PO Box 30285	When was the debt incurred?		
;	Salt Lake City, UT 84130			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
ı	Debtor 1 only	☐ Contingent		
I	Debtor 2 only	☐ Unliquidated		
I	Debtor 1 and Debtor 2 only	☐ Disputed		
I	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt s the claim subject to offset?	report as priority claims	tration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
I	☐ Yes	Other. Specify Credit Card	<u> </u>	

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 23 of 57

Chase/Amazon	Last 4 digits of account number 4782	\$2,700.00
Nonpriority Creditor's Name PO Box 15298 Wilmington, DE 19850	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit	
Citibank Nonpriority Creditor's Name	Last 4 digits of account number 3395	\$2,178.00
PO Box 9001055 Louisville, KY 40291	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one. ☐ Debtor 1 only	_	
Debtor 2 only	Contingent	
Debtor 2 only Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
☐ Debtor Fand Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Credit Card	
Dell Financial Services	Last 4 digits of account number 4889	\$2,500.00
Nonpriority Creditor's Name PO Box 6403 Carol Stream, IL 60197	When was the debt incurred?	
Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt s the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Credit Card	

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 24 of 57

JC Penney	Last 4 digits of account number 2871	\$2,184.8
Nonpriority Creditor's Name PO Box 965007 Orlando, FL 32896	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit Card	
Mark Dubin MD	Last 4 digits of account number 0377	\$210.
Nonpriority Creditor's Name PO Box 5075	When was the debt incurred?	
Buffalo Grove, IL 60089 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	76 of the date you me, the stannie. Onesk an that apply	
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
Mark Dubin MD	Last 4 digits of account number 0533	\$20.
Nonpriority Creditor's Name		<u> </u>
PO Box 5075	When was the debt incurred?	
Buffalo Grove, IL 60089 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
\square Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical	

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 25 of 57

Kristina M. Pope	Case number (if know)	
Meijer	Last 4 digits of account number 2551	\$683.00
Nonpriority Creditor's Name PO Box 182273	When was the debt incurred?	******
Columbus, OH 43218 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify Credit card	
Midwest Asthma Allergy, Inc.	Last 4 digits of account number 6551	\$348.00
Nonpriority Creditor's Name		
1425 N. McClean Blvd. Suite 100	When was the debt incurred?	
Elgin, IL 60123		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Vho incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
lebt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify Medical	
Midwest Emergency Associates Nonpriority Creditor's Name	Last 4 digits of account number 8023	\$39.53
PO Box 740023	When was the debt incurred?	
Cincinnati, OH 45274		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_		
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans	
☐ Check if this claim is for a community		
is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
•	· · · · · · · · · · · · · · · · · · ·	

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 26 of 57

	Dominic M. Pope Kristina M. Pope		Case number (if know)	
N P V N W III	In a community control of the debtors and another community ebt control of the debt? In a community control of the debtors and another community ebt control of the debt? In a community control of the debtors and another community ebt control of the debtors control of the debtors and another control of the debtor o	report as priority claims Debts to pension or profit-sharing	d claim: Tration agreement or divorce that you did not g plans, and other similar debts	\$40,724.23
] Yes	Other. Specify		
N 8 V N W C C C	lavy Federal Credit Union onpriority Creditor's Name 20 Follin Lane SE lienna, VA umber Street City State Zlp Code l/ho incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community ebt of the claim subject to offset? No Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim in the claim	d claim: Tration agreement or divorce that you did not g plans, and other similar debts	\$6,500.00
N N O C O N N W O C C C C C C C C C C C C C C C C C C	In three tentrals on priority Creditor's Name 447 W. Talcott Chicago, IL 60631 umber Street City State Zlp Code //ho incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community ebt the claim subject to offset? No Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim in the claim	d claim: ration agreement or divorce that you did not	\$58.90

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 27 of 57

Physicians Immediate Care	Last 4 digits of account number 6163	\$62.1
Nonpriority Creditor's Name PO Box 8799 Carol Stream, IL 60197	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical	
St. Alexius MC	Last 4 digits of account number 9535	\$803.58
Nonpriority Creditor's Name 22589 Network PI Chicago, IL 60673	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Medical	
St. Alexius Medical Center	Last 4 digits of account number 5440	\$472.02
Nonpriority Creditor's Name 22589 Network PI.	When was the debt incurred?	<u> </u>
Chicago, IL 60673 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical	

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 28 of 57

	Dominic M. Pope Kristina M. Pope		Case number (if know)	
4.2	St. Alexius Medical Center	Last 4 digits of account number	0294	\$534.03
	Nonpriority Creditor's Name 22589 Network PI Chicago, IL 60673	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	Other. Specify Medical		
٠ ١	Sycrony Bank/Amazon Nonpriority Creditor's Name	Last 4 digits of account number	4442	\$1,600.00
	PO Box 965015 Orlando, FL 32896	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□ Yes	Other. Specify Credit Card	<u> </u>	
	Sycrony Bank/Paypal Nonpriority Creditor's Name	Last 4 digits of account number	8073	\$3,300.00
	PO Box 965005 Orlando, FL 32896	When was the debt incurred?		
٦	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card	<u> </u>	

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 29 of 57

	Dominic M. Pope Kristina M. Pope		Case number (if know)	
- 1	Sycrony Bank/Walmart	Last 4 digits of account number	1928	\$1,400.00
	Nonpriority Creditor's Name PO Box 965024 Orlando, FL 32896	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit		
9	Syncrony Bank/JC Penney Nonpriority Creditor's Name	Last 4 digits of account number	2791	\$2,900.00
	PO Box 965007 Orlando, FL 32896	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit		
	Syncrony Bank/Pay Pal Nonpriority Creditor's Name	Last 4 digits of account number	9143	\$2,800.00
	PO Box 965007 Orlando, FL 32896	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	I	

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 30 of 57

	1 Dominic 2 Kristina I	•		Case r	number (if know)			
4.3 5	Syncrony E	Bank/Walmart	Last 4 digits of account number	er <u>9325</u> \$1,				
	PO Box 965 Orlando, Fl	5024	When was the debt incurred?					
-	Number Street	City State ZIp Code	As of the date you file, the claim i	s: Check	k all that apply			
		the debt? Check one.						
	☐ Debtor 1 on	nly	☐ Contingent					
	Debtor 2 on	nly	☐ Unliquidated					
	Debtor 1 an	nd Debtor 2 only	☐ Disputed					
	☐ At least one	e of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if th	is claim is for a community	☐ Student loans					
	debt Is the claim su	ubject to offset?	☐ Obligations arising out of a separeport as priority claims	ration ag	greement or divorce that you did not			
	■ No		☐ Debts to pension or profit-sharin	g plans,	and other similar debts			
	Yes		■ Other. Specify Credit Card	I				
4.3	Cun arany F	Dank/Malmort		7975		¢2 500 00		
6	Nonpriority Cre	Bank/Walmart	Last 4 digits of account number	1915) 	\$3,500.00		
	PO Box 965 Orlando, Fl	5024	When was the debt incurred?					
		City State Zlp Code	As of the date you file, the claim i	s: Check	k all that apply			
	Who incurred the debt? Check one.							
	■ Debtor 1 only		☐ Contingent					
	Debtor 2 on	nly	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only		☐ Disputed					
	☐ At least one	e of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if th	is claim is for a community	☐ Student loans					
	debt Is the claim su	ubject to offset?	Obligations arising out of a separeport as priority claims	ration ag	greement or divorce that you did not			
	■ No		☐ Debts to pension or profit-sharin	g plans,	and other similar debts			
	Yes		Other. Specify Credit card					
is tryir	is page only if	om you for a debt you owe to som	That You Already Listed out your bankruptcy, for a debt that y eone else, list the original creditor in you listed in Parts 1 or 2, list the addi	Parts 1	or 2, then list the collection agency	here. Similarly, if you		
		s in Parts 1 or 2, do not fill out or			,	,		
Part 4:	Add the A	mounts for Each Type of Uns	ecured Claim					
	the amounts of f unsecured cla	7 1	s. This information is for statistical re	eporting	g purposes only. 28 U.S.C. §159. Add	I the amounts for each		
					Total Claim			
1	6а. Г otal	Domestic support obligations		6a.	\$	•		
cla from Pa	aims	Taxos and cortain other debts	you awa the government	6h	0.00			
II OIII F	art 1 6b. 6c.		-	6b. 6c.	\$ <u>0.00</u> \$ 0.00			
	6d.		cured claims. Write that amount here.	6d.	\$ 0.00			
	6e.	Total Priority. Add lines 6a throu	gh 6d.	6e.	\$0.00			
_	6f.	Student loans		6f.	Total Claim \$ 40,724.23			
	Total aims							
from P	art 2 6g.	Obligations arising out of a sep you did not report as priority cl	paration agreement or divorce that aims	6g.	\$0.00			

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 31 of 57

Debtor 1 Debtor 2 Dominic M. Pope Kristina M. Pope

6h. Debts to pension or profit-sharing plans, and other similar debts
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
6j. Total Nonpriority. Add lines 6f through 6i.
6c. Case number (if know)
6d. \$ 0.00
6d. \$ 0.00
6d. \$ 53,605.17

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main

		Docume	THE TAUC OF OT ST	
Fill in this infor	mation to identify your	case:		
Debtor 1	Dominic M. Pope			
	First Name	Middle Name	Last Name	
Debtor 2	Kristina M. Pope			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	Oity		Olato	211 0000	
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<u>—</u>
2.4			<u> </u>		
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	Oity		State	ZIF Coue	
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main

	0000 17 20400 1	Docume	nt Page 33 c	of 57	5 Describant
Fill in this in	formation to identify your				
Debtor 1	Dominic M. Pope				
Dahta a	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Kristina M. Pope First Name	Middle Name	Last Name	· ·	
United States	s Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numbe	r				
(if known)					Check if this is an amended filing
Official I	Form 106H				·
	le H: Your Cod	ebtors			12/15
eople are fil ill it out, and	ing together, both are equa	ally responsible for suppl boxes on the left. Attach	lying correct informat the Additional Page to	ion. If more space is nee	e as possible. If two married eded, copy the Additional Page, of any Additional Pages, write
1. Do yo	u have any codebtors? (If y	ou are filing a joint case, d	o not list either spouse	as a codebtor.	
■ No □ Yes					
⊔ Yes					
	n the last 8 years, have you California, Idaho, Louisiana,				states and territories include
■ No. G	o to line 3.				
_	Did your spouse, former spou	ise, or legal equivalent live	with you at the time?		
in line 2	again as a codebtor only in 6D), Schedule E/F (Official	f that person is a guarant	or or cosigner. Make	sure you have listed the	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fil
	olumn 1: Your codebtor ne, Number, Street, City, State and ZI	P Code		Column 2: The cred Check all schedules	itor to whom you owe the debt that apply:
3.1				☐ Schedule D, line	
Nai	me			☐ Schedule E/F, line	e
				☐ Schedule G, line	
Nui City	mber Street y	State	ZIP Code	_	
3.2				☐ Schedule D, line	
Nar	me			Schedule E/F, line	e
				☐ Schedule G, line	
Nui	mher Street			_	

State

City

ZIP Code

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 34 of 57

Fill in this information t	o identify your case:	
Debtor 1	Dominic M. Pope	
Debtor 2 (Spouse, if filing)	Kristina M. Pope	
United States Bankrup	otcy Court for the: NORTHERN DISTRICT OF ILLINOIS	
Case number (If known)		Check if this is: An amended filing A supplement showing postpetition chapter
Official Form	<u>106I</u>	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Describe Employment					
1.	Fill in your employment information.		Debtor 1	1	Debtor 2 or non-filing spou	se
	If you have more than one job,	Fundament status	■ Empl	oyed	☐ Employed	
	attach a separate page with information about additional	Employment status	☐ Not e	mployed	■ Not employed	
	employers.		Global	Forwarding		
	Include part-time, seasonal, or	Occupation	Coordi	nation		
	self-employed work.	Employer's name	CH Rol	binson		
	Occupation may include student or homemaker, if it applies.	Employer's address		. Mittel Blvd Dale, IL 60191		
		How long employed th	nere?	9 years		

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

				For Debtor 1		Debtor 2 or filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$_	3,678.00	\$	0.00
3.	Estimate and list monthly overtime pay.	3.	+\$_	0.00	+\$	0.00
4.	Calculate gross Income. Add line 2 + line 3.	4.	\$	3,678.00	\$	0.00

Official Form 106I Schedule I: Your Income page 1

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 35 of 57

Deb Deb	tor 1 tor 2	Dominic M. Pope Kristina M. Pope	_	(Case	number (if known)				
					For Debtor 1			For Debtor 2 or non-filing spouse		
	Cop	by line 4 here	4.		\$_	3,678.00	9	5	0.00	_
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	a.	\$	1,068.00	9	\$	0.00	
	5b.	Mandatory contributions for retirement plans	5b		<u>*</u> -	0.00	9	a	0.00	_
	5c.	Voluntary contributions for retirement plans	50		\$_	0.00	9	<u> </u>	0.00	_
	5d.	Required repayments of retirement fund loans	50		<u> </u>	0.00	9	<u> </u>	0.00	_
	5e.	Insurance	5e	€.	\$	354.91	9	<u> </u>	0.00	_
	5f.	Domestic support obligations	5f.		\$	0.00	9	δ	0.00	_
	5g.	Union dues	59] .	\$_	0.00	9	δ	0.00	_
	5h.	Other deductions. Specify:	5h	1.+	\$	0.00	+ \$	\$	0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,422.91	9	\$	0.00	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,255.09	9	\$	0.00	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	a.	\$	0.00	9	6	0.00	
	8b.	Interest and dividends	8b).	\$	0.00		·	0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80) .	\$	0.00	9		797.65	_
	8d.	Unemployment compensation	80	d.	\$	0.00	9	\$	0.00	_
	8e.	Social Security	8e	€.	\$	0.00	9	\$	0.00	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g	j.	\$_ \$_	0.00 0.00	9	\$	0.00	_
	8h.	Other monthly income. Specify:	8h	1.+	\$_	0.00	+ 9	<u> </u>	0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	§	0.00	\$	\$	797.6	5
10	Cal	culate menthly income. Add line 7 u line 0	10.	Φ.		2.255.00		707 CE	= \$	2.052.74
10.		culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		2,255.09 + \$		797.65		3,052.74
11.	Incl othe Do	te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe			•	•	in <i>Schedule</i>	e J. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certailies							\$	3,052.74
13.	Do	you expect an increase or decrease within the year after you file this form	?						Combi	ned y income
		No. Yes Explain:								

Fill in this	s information to identify y	our case:								
Debtor 1	Dominic M.	Pope			Checl	k if this is:				
Debtor 2	Kristina M.	Kristina M. Pope				☐ An amended filing☐ A supplement showing postpetition chapte				
(Spouse,		Т					the following date:			
United Sta	ates Bankruptcy Court for the	e: NORTI	HERN DISTRICT OF ILLIN	OIS	1	MM / DD / YYYY				
Case num (If known)										
Offici	ial Form 106J									
	edule J: Your						12			
informat number	tion. If more space is no (if known). Answer eve	eded, atta ry questic	e. If two married people at ach another sheet to this on.							
Part 1: 1. Is t	Describe Your Hous his a joint case?	EIIUIU								
	No. Go to line 2.									
■,	Yes. Does Debtor 2 live	in a sepa	rate household?							
	■ No □ Yes. Debtor 2 mu	st file Offic	ial Form 106J-2, <i>Expenses</i>	s for Separate House	hold of Debto	or 2.				
2. Do	you have dependents?	□ No	. ,	,						
Do	not list Debtor 1 and btor 2.	Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?			
Do	not state the						□ No			
	pendents names.			Son		6	■ Yes			
				_			□ No			
				Daughter		8	■ Yes			
				Daughter		15	□ No ■ Yes			
				<u> </u>			■ res			
				Son		18	Yes			
exp	your expenses include penses of people other urself and your depende	than 📮	No Yes							
Part 2:	Estimate Your Ongo	ing Month	ly Expenses							
expense	e your expenses as of yes as of a date after the ble date.	our bankı bankrupto	ruptcy filing date unless y cy is filed. If this is a supp	ou are using this fo plemental <i>Schedul</i> e	orm as a sup J, check the	oplement in a Cha e box at the top o	apter 13 case to report f the form and fill in th			
the valu			government assistance i cluded it on <i>Schedule I:</i> \			Your exp	enses			
	e rental or home owners ments and any rent for the		nses for your residence. I or lot.	nclude first mortgage	4. \$		590.25			
lf n	ot included in line 4:									
					40 °C		0.00			
4a. 4b.		s, or rente	r's insurance		4a. \$ 4b. \$		0.00			
4c	Home maintenance r				4c \$		0.00			

4d. \$

5. \$

0.00

0.00

Homeowner's association or condominium dues

Additional mortgage payments for your residence, such as home equity loans

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 37 of 57

Debte Debte		Dominic Kristina		Case num	ber (if known)	
6.	Utilit	ies:				
	6a.	Electricity,	heat, natural gas	6a.	\$	125.00
	6b.	Water, sev	wer, garbage collection	6b.	\$	107.00
	6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
	6d.	Other. Spe	ecify: Natural gas	6d.	\$	50.00
7.	Food	and house	ekeeping supplies	7.	\$	600.00
8.	Child	dcare and c	hildren's education costs	8.	\$	50.00
9.	Cloth	ning, laund	ry, and dry cleaning	9.	\$	50.00
10.	Pers	onal care p	products and services	10.	\$	50.00
		•	ntal expenses	11.	\$	120.00
12.	Trans	sportation.	Include gas, maintenance, bus or train fare.			
			ar payments.	12.	\$	275.00
13.	Ente	rtainment,	clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
14.	Char	itable cont	ributions and religious donations	14.	\$	0.00
15.	Insur	rance.				
			surance deducted from your pay or included in lines 4 or 20			
	15a.	Life insura	nce	15a.	·	0.00
	15b.	Health ins	urance	15b.	\$	0.00
	15c.	Vehicle ins	surance	15c.	\$	100.00
	15d.	Other insu	rance. Specify:	15d.	\$	0.00
16.	Taxe	s. Do not in	clude taxes deducted from your pay or included in lines 4 c	r 20.		
	Spec	ify:		16.	\$	0.00
			ease payments:		_	
		, ,	ents for Vehicle 1	17a.	·	0.00
			ents for Vehicle 2	17b.	·	0.00
		Other. Spe	· ·	17c.	\$	0.00
		Other. Spe	•	17d.	\$	0.00
			of alimony, maintenance, and support that you did not		Φ.	682.00
			your pay on line 5, Schedule I, Your Income (Official Fo	rm 106l). 18.	\$	
			s you make to support others who do not live with you.		\$	0.00
	Spec	,		19.		
			erty expenses not included in lines 4 or 5 of this form o			0.00
			s on other property	20a.	·	0.00
		Real estat		20b.		0.00
			nomeowner's, or renter's insurance	20c.		0.00
			nce, repair, and upkeep expenses	20d.	·	0.00
	20e.	Homeown	er's association or condominium dues	20e.	\$	0.00
21.	Othe	r: Specify:		21.	+\$	0.00
22	Calci	ulate vour i	monthly expenses			
		-	through 21.		\$	3,049.25
			2 (monthly expenses for Debtor 2), if any, from Official Forn	n 106 l-2	\$	3,049.23
				1 1003-2		
	22c. /	Add line 22a	a and 22b. The result is your monthly expenses.		\$	3,049.25
23.	Calc	ulate your i	monthly net income.			J
			12 (your combined monthly income) from Schedule I.	23a.	\$	3,052.74
			monthly expenses from line 22c above.	23b.	-\$	3,049.25
			•			3,0 1010
	23c.		our monthly expenses from your monthly income. is your <i>monthly net income</i> .	23c.	\$	3.49
	For exmodifi	xample, do yo ication to the O.	an increase or decrease in your expenses within the ye ou expect to finish paying for your car loan within the year or do you terms of your mortgage?			ase or decrease because of a
	□ Ye	es.	Explain here:			

Fill in this infor	mation to identify your	ease.		
Debtor 1	Dominic M. Pope First Name	Middle Name Last Nam		
Dobtor 2		Middle Marile Last Mari	6	
Debtor 2 (Spouse if, filing)	Kristina M. Pope	Middle Name Last Nam		
(Spouse II, IIIIIIg)	i list Name	Middle Name Last Nam	6	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number				
(if known)				☐ Check if this is an amended filing
Official Form		n Individual Debtor	s Schedules	12/15
·	8 U.S.C. §§ 152, 1341, 1	519, and 35/1.		
Did you pa	y or agree to pay some	one who is NOT an attorney to help you	fill out bankruptcy forms?	
■ No				
☐ Yes. I	Name of person			kruptcy Petition Preparer's Notice, ,, and Signature (Official Form 119)
•	alty of perjury, I declare e true and correct.	that I have read the summary and sched	dules filed with this declaration	on and
X /s/ Dor	minic M. Pope	X /s/	Kristina M. Pope	
Domin	nic M. Pope	Kri	stina M. Pope	
Signatu	re of Debtor 1	Sig	nature of Debtor 2	
Date .	July 8, 2017	Dat	e July 8, 2017	

Filli	in this inforn	nation to identify you	case:			
Deb	tor 1	Dominic M. Pope				
Deb	tor 2	First Name Kristina M. Pope	Middle Name	Last Name		
	use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ba	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
Cas	e number					
(if kno					-	heck if this is an mended filing
						nonaca ming
~ ′′		407				
	<u>icial Fo</u>		A (() () () () ()			
Sta	itement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/16
					equally responsible for supper additional pages, write you	
		n). Answer every ques		this form. On the top of any	additional pages, write you	r name and case
Part	Give F	etails About Your Ma	rital Status and Where You	ı Lived Before		
		r current marital statu				·
	wilat is you	Current mantai statu	5:			
	■ Married					
		ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	No					
	☐ Yes. Lis	t all of the places you li	ved in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3.	Within the la	ıst 8 vears. did vou ev	ver live with a spouse or led	gal equivalent in a commun	ity property state or territory	? (Community property
					co, Texas, Washington and W	
	■ No					
	_	ake sure you fill out Sch	nedule H: Your Codebtors (O	fficial Form 106H).		
Dow	- Evoloi	n the Courses of Vou	· Income			
Part	Explai	n the Sources of You	rincome			
	Fill in the tota	al amount of income yo	u received from all jobs and a	ng a business during this ye all businesses, including part- e together, list it only once ur		dar years?
	□ No					
	_	in the details.				
			Debter 4		Dahtar 2	
			Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$22,687.00	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business		☐ Operating a business	
			— Operating a business		. 5	

Official Form 107

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 40 of 57

Debtor 2 Kristina M. Pope	Case number (if known)			
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of incom Check all that apply	
For last calendar year: (January 1 to December 31, 2016)	■ Wages, commissions, bonuses, tips	\$43,474.00	☐ Wages, commis bonuses, tips	ssions, \$0.00
	☐ Operating a business		☐ Operating a bus	siness
For the calendar year before that: (January 1 to December 31, 2015)	■ Wages, commissions, bonuses, tips	\$46,227.00	☐ Wages, commis bonuses, tips	ssions, \$0.00
	☐ Operating a business		☐ Operating a bus	siness
winnings. If you are filing a joint call List each source and the gross inco No Yes. Fill in the details.	•		•	
	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of incom Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:		\$0.00	Child Support	\$4,452.00
For last calendar year: (January 1 to December 31, 2016)		\$0.00	Child Support	\$9,646.00
For the calendar year before that: (January 1 to December 31, 2015)		\$0.00	Child Support	\$9,646.00
i. Are either Debtor 1's or Debtor 2 No. Neither Debtor 1 nor I individual primarily for a		er debts? umer debts. Consumer debt old purpose."		S.C. § 101(8) as "incurred by an
paid that ci	each creditor to whom you pa reditor. Do not include payme	nts for domestic support oblig		ents and the total amount you support and alimony. Also, do
	e payments to an attorney for t nt on 4/01/19 and every 3 year		or after the date of ac	djustment.
	or both have primarily const ore you filed for bankruptcy, d		ıl of \$600 or more?	
■ No. Go to line 7	7.			
include pay	each creditor to whom you pa yments for domestic support o r this bankruptcy case.			u paid that creditor. Do not b, do not include payments to an
Creditor's Name and Address				

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 41 of 57

De	btor 2 Kristina M. Pope		Cas	e number (if known)		
7.	Within 1 year before you filed for bankrup <i>Insiders</i> include your relatives; any general p of which you are an officer, director, person in a business you operate as a sole proprietor, alimony.	artners; relatives of any gen n control, or owner of 20% of	neral partners; partne or more of their voting	erships of which yo g securities; and a	ou are a general ny managing ag	partner; corporations ent, including one fo
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the	nis payment
В.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co		yments or transfer a	iny property on a	ccount of a del	ot that benefited an
	No					
	Yes. List all payments to an insider	D-1(Total amazoni	A	D ((
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credite	
Pai	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrup List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title					or custody
	Case number	rataro or mo caco	Court or agonoy		Glatao or tho	0.00
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details belo ■ No. Go to line 11. □ Yes. Fill in the information below. Creditor Name and Address			oreclosed, garnis	shed, attached,	seized, or levied? Value of the property
		Explain what happene	d			
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment be ■ No □ Yes. Fill in the details.		cluding a bank or fir	nancial institutior	n, set off any an	nounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or □ No □ Yes		erty in the possess			it of creditors, a
Pai	rt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift.	ptcy, did you give any gift	ts with a total value	of more than \$60	00 per person?	
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date: the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					

Dominic M. Pope

Debtor 1

Entered 07/08/17 09:43:09 Case 17-20435 Doc 1 Filed 07/08/17 Desc Main Page 42 of 57 Document Debtor 1 Dominic M. Pope Debtor 2 Kristina M. Pope Case number (if known) 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο п Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You James Engel **Attorney Fees** June, 2017 \$1,115.00 2071 Irving Park Hanover Park, IL 60133 jengel2001@sbcglobal.net 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο п Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. П Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was

Address

Person's relationship to you

property transferred

made

payments received or debts

paid in exchange

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 43 of 57

Debtor 1 Dominic M. Pope Debtor 2 Kristina M. Pope

Case number (if known)

19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.						
	Name of trust	Description and v	alue of the pro	perty trans	sferred	Date Transfer was made	
Par	t 8: List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and St	torage Unit	ts		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, associated No □ Yes. Fill in the details.	r other financial accou	nts; certificates	s of deposi			
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bar No Yes. Fill in the details.			re you filed for bankrupt	cy?			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or I to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
Par	t 9: Identify Property You Hold or Control	for Someone Else					
23.	Do you hold or control any property that sor for someone. No Yes. Fill in the details.	meone else owns? Incl	ude any proper	ty you bor	rowed from, are storing	for, or hold in trust	
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value	
	Nancy Williams 16 Fillmore Lane Streamwood, IL 60107	at the residence	е	our hom	the furnishings in the belong to my in-law/mother	\$1,000.00	

Entered 07/08/17 09:43:09 Desc Main Case 17-20435 Doc 1 Filed 07/08/17 Document Page 44 of 57

Dominic M. Pope Debtor 1 Debtor 2 Kristina M. Pope

Case number (if known)

Part 10:	Give Details About Environmental Information
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For	the purpose of Part 10, the following definitions a	apply:			
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.				
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal s	•	w, whether you now own, operate, o	or utilize it or used	
	Hazardous material means anything an environr hazardous material, pollutant, contaminant, or s		vaste, hazardous substance, toxic s	ubstance,	
Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of when t	hey occurred.		
24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?				
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice	
25.	Have you notified any governmental unit of any	release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice	
26.	Have you been a party in any judicial or adminis	trative proceeding under any enviro	nmental law? Include settlements a	and orders.	
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	lature of the case	Status of the case	
Par	11: Give Details About Your Business or Conr	nections to Any Business			
27.	Within 4 years before you filed for bankruptcy, d	lid you own a business or have any	of the following connections to any	business?	
	☐ A sole proprietor or self-employed in a to	rade, profession, or other activity, ei	ther full-time or part-time		
	☐ A member of a limited liability company	(LLC) or limited liability partnership	(LLP)		
	☐ A partner in a partnership				
	☐ An officer, director, or managing executi	ive of a corporation			
	☐ An owner of at least 5% of the voting or	equity securities of a corporation			

Yes. Check all that apply above and fill in the details below for each business. **Business Name** Address

(Number, Street, City, State and ZIP Code)

No. None of the above applies. Go to Part 12.

Describe the nature of the business

Name of accountant or bookkeeper

Employer Identification number Do not include Social Security number or ITIN.

Dates business existed

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Page 45 of 57 Document Debtor 1 Dominic M. Pope Kristina M. Pope Debtor 2 Case number (if known) 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Kristina M. Pope /s/ Dominic M. Pope Kristina M. Pope Dominic M. Pope Signature of Debtor 1 Signature of Debtor 2 Date Date July 8, 2017 July 8, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 46 of 57

Fill in this information to identify your case:				
Debtor 1	Dominic M. Pope			
	First Name	Middle Name	Last Name	
Debtor 2	Kristina M. Pope			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	<u>_</u>
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	_
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
oodaning door.		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 47 of 57

Debtor 1 Debtor 2	Dominic M. Pope Kristina M. Pope	Case number (if known)	
		<u>_</u>	
name:		☐ Retain the property and redeem it.☐ Retain the property and enter into a	☐ Yes
Descrip	otion of	Reaffirmation Agreement.	
propert	•	☐ Retain the property and [explain]:	
securin	g debt:		_
	List Your Unexpired Personal Property I		
in the info	rmation below. Do not list real estate lea	u listed in Schedule G: Executory Contracts and Unexpired uses. Unexpired leases are leases that are still in effect; the lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe	your unexpired personal property lease	S	Will the lease be assumed?
Lessor's r	name:		□ No
Description Property:	on of leased		☐ Yes
-1 - 7			Li Tes
Lessor's r	name: on of leased		□ No
Property:	on or leased		☐ Yes
Lessor's r	name:		□ No
Description Property:	on of leased		☐ Yes
Lessor's r	name:		
Description	on of leased		□ No
Property:			☐ Yes
Lessor's r			□ No
Property:	on of leased		☐ Yes
Lessor's r	name:		□ No
Description Property:	on of leased		_
i Toperty.			☐ Yes
Lessor's r	name: on of leased		□ No
Property:	in or leased		☐ Yes
Part 3:	Sign Below		
		cated my intention about any property of my estate that sec	cures a debt and any personal
,	hat is subject to an unexpired lease.		
	Oominic M. Pope ninic M. Pope	X /s/ Kristina M. Pope Kristina M. Pope	
	ature of Debtor 1	Signature of Debtor 2	
Date	July 8, 2017	Date July 8, 2017	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 52 of 57

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In	Dominic M. Pope re Kristina M. Pope		Case No.	
	- Кнаша ил горе	Debtor(s)	Chapter	7
	DISCLOSUDE OF COMDEN	CATION OF ATTO	DNEV EOD D	EDTOD(C)
	DISCLOSURE OF COMPEN	SATION OF ATTO	KNEY FOR D	EBIOK(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy	, or agreed to be paid	d to me, for services rendered or to
	For legal services, I have agreed to accept			1,115.00
	Prior to the filing of this statement I have received		\$	1,115.00
	Balance Due		\$	0.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed comper	nsation with any other person	n unless they are mer	nbers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name			
5.	In return for the above-disclosed fee, I have agreed to reno	der legal service for all aspec	ets of the bankruptcy	case, including:
	 a. Analysis of the debtor's financial situation, and renderi b. Preparation and filing of any petition, schedules, staten c. Representation of the debtor at the meeting of creditors d. [Other provisions as needed] Negotiations with secured creditors to recreaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on house 	nent of affairs and plan whice s and confirmation hearing, a duce to market value; ex s as needed; preparation	h may be required; and any adjourned he	arings thereof;
5.	By agreement with the debtor(s), the above-disclosed fee of Representation of the debtors in any disc any other adversary proceeding.			ces, relief from stay actions or
		CERTIFICATION		
this	I certify that the foregoing is a complete statement of any as bankruptcy proceeding.	agreement or arrangement fo	or payment to me for	representation of the debtor(s) in
	July 8, 2017	/s/ James Engel		
	Date	James Engel Signature of Attorn	- I av	
		James Engel	ey	
		2071 Irving Park		
		Hanover Park, II 630 837-8045 F	- 60133 ax: 630 837-8072	
		jengel2001@sbo		
		Name of law firm		

Case 17-20435 Doc 1 Filed 07/08/17 Entered 07/08/17 09:43:09 Desc Main Document Page 53 of 57

United States Bankruptcy Court Northern District of Illinois

In re	Dominic M. Pope Kristina M. Pope		Case No.		
	•	Debtor(s)	Chapter	7	_
	V	ERIFICATION OF CREDITOR M	MATRIX		
		Number of	f Creditors: _	36	3
	The above-named Debtor(s (our) knowledge.	s) hereby verifies that the list of credi	itors is true and	I correct to the best of my	
Date:	July 8, 2017	/s/ Dominic M. Pope			
		Dominic M. Pope Signature of Debtor			
Date:	July 8, 2017	/s/ Kristina M. Pope Kristina M. Pope			

Adventist Hinsdale Hospital 75 Remittance Dr. Suite 3250 Chicago, IL 60675

Alexian Brothers MC PO Box 14000 Belfast, ME 04915

Alexian Brothers MC PO Box 14000 Belfast, ME 04915

Alexian Brothers MC 22589 Network Pl Chicago, IL 60673

Alliant Credit Union 11545 W. Tohy Chicago, IL 60666

Barclay's Bank Delaware 125 S. West St. Wilmington, DE 19801

Capital One PO Box 30281 Salt Lake City, UT 84130

Capital One c/o Blitt & Gaines 661 Glenn Wheeling, IL 60090

Capital One c/o Blitt & Gaines 661 Glenn Wheeling, IL 60090

Capital One Bank PO Box 30285 Salt Lake City, UT 84130 Capital One Bank PO Box 30285 Salt Lake City, UT 84130

Capital One/HSBC Bank PO Box 30285 Salt Lake City, UT 84130

Capital One/HSBC Bank PO Box 30285 Salt Lake City, UT 84130

Chase/Amazon PO Box 15298 Wilmington, DE 19850

Citibank PO Box 9001055 Louisville, KY 40291

Dell Financial Services PO Box 6403 Carol Stream, IL 60197

JC Penney PO Box 965007 Orlando, FL 32896

Mark Dubin MD PO Box 5075 Buffalo Grove, IL 60089

Mark Dubin MD PO Box 5075 Buffalo Grove, IL 60089

Meijer PO Box 182273 Columbus, OH 43218

Midwest Asthma Allergy, Inc. 1425 N. McClean Blvd. Suite 100 Elgin, IL 60123

Midwest Emergency Associates PO Box 740023 Cincinnati, OH 45274

Navient PO Box 9500 Wilkes Barre, PA 18773

Navy Federal Credit Union 820 Follin Lane SE Vienna, VA

Northwest ENT Associates 7447 W. Talcott Chicago, IL 60631

Physicians Immediate Care PO Box 8799 Carol Stream, IL 60197

St. Alexius MC 22589 Network Pl Chicago, IL 60673

St. Alexius Medical Center 22589 Network Pl. Chicago, IL 60673

St. Alexius Medical Center 22589 Network Pl Chicago, IL 60673

Sycrony Bank/Amazon PO Box 965015 Orlando, FL 32896

Sycrony Bank/Paypal PO Box 965005 Orlando, FL 32896

Sycrony Bank/Walmart PO Box 965024 Orlando, FL 32896

Syncrony Bank/JC Penney PO Box 965007 Orlando, FL 32896

Syncrony Bank/Pay Pal PO Box 965007 Orlando, FL 32896

Syncrony Bank/Walmart PO Box 965024 Orlando, FL 32896

Syncrony Bank/Walmart PO Box 965024 Orlando, FL 32896